



PATENT  
Attorney Docket No. NMT-015

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

|               |                        |            |                  |
|---------------|------------------------|------------|------------------|
| APPLICANT(S): | Chanduszko             | BATCH NO.: | Not yet assigned |
| SERIAL NO.:   | 10/660,444             | GROUP NO.: | Not yet assigned |
| FILING DATE:  | September 11, 2003     | EXAMINER:  | Not yet assigned |
| TITLE:        | Septal Puncture Device |            |                  |

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**TRANSMITTAL OF FORMAL DRAWINGS**

Sir:

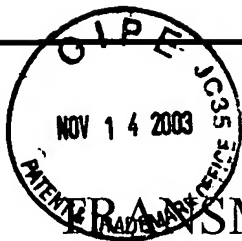
Attached please find the formal drawings for this application - Number of Sheets – 15, corresponding to FIGS. 1, 2, 3A-3B, 4, 5A-5B, 6A-6B, 7A-7B, 8, 9, 10A-10C, 11, 12A-12C, 13.

Respectfully submitted,

Date: November 12, 2003  
Reg. No. 44,244

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# TRANSMITTAL FORM

|                           |                    |
|---------------------------|--------------------|
| Application Serial Number | 10/660,444         |
| Filing Date               | September 11, 2003 |
| First Named Inventor      | Chanduszeko        |
| Group Art Unit            | Not yet assigned   |
| Examiner Name             | Not yet assigned   |
| Attorney Docket No.       | NMT-015            |
| Patent No.                | Not applicable     |
| Issue Date                | Not applicable     |

## ENCLOSURES (check all that apply)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
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| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal Form<br><br><input type="checkbox"/> Amendment/Response<br><input type="checkbox"/> Preliminary<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]<br><br><input type="checkbox"/> Petition for Extension of Time<br><br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Form PTO-1449<br><input type="checkbox"/> Copies of IDS Citations<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Sequence Listing submission<br><input type="checkbox"/> Paper Copy/CD<br><input type="checkbox"/> Computer Readable Copy<br><input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application<br><input checked="" type="checkbox"/> Formal Drawing(s) (15 sheets)<br><br><input type="checkbox"/> Request For Continued Examination (RCE) Transmittal<br><br><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application<br><br><input type="checkbox"/> Small Entity Statement<br><br><input type="checkbox"/> CD(s) for large table or computer program<br><br><input type="checkbox"/> Amendment After Allowance<br><br><input type="checkbox"/> Request for Certificate of Correction<br><input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences<br><br><input type="checkbox"/> Appeal Brief (in triplicate)<br><br><input type="checkbox"/> Status Inquiry<br><br><input checked="" type="checkbox"/> Return Receipt Postcard<br><input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8<br><br><input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8<br><br><input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)<br><br><input checked="" type="checkbox"/> Transmittal of Formal Drawings (1 pg. ) |
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## CORRESPONDENCE ADDRESS

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## SIGNATURE BLOCK

Respectfully submitted,  
  
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TITLE: Septal Puncture Device

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 12 day of November, 2003.

  
Karina L. Branzetti

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

1. Transmittal Form (1 pg.);
2. Transmittal for Formal Drawings (1 pg.);
3. Formal Drawings (15 sheets); and
4. Return receipt postcard.